

THE
BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XXXV. WEDNESDAY, NOVEMBER 25, 1846.

No. 17.

DR. C. HALL ON THE FEVERS OF THE CHAMPLAIN VALLEY.

[Communicated for the Boston Med. and Surg. Journal.—Continued from page 322.]

SUCH are some of the peculiarities and secondary results of our febrile disorders. The predisposing cause of them is not as easily told or accounted for. In the formation of these consecutive results, much, no doubt, may be attributed to the exciting influences of intemperance, modes of dress, and improvidences in living, which are common everywhere; but these artificial exciting causes depend more or less upon predisposition, in a majority of cases, for their morbid results. The present object is not to dwell on these important topics, but to endeavor to search out the atmospheric predisposing agent peculiar to the Champlain valley.

The writer has read the reviews of the essays of Drs. Wight, Gardner, Metcalfe and others, published in the American Journal of Medical Sciences, on the subjects of "Animal and Vegetable Physiology," "Miasmata," and the "Agency of Caloric," and yields due deference to their opinions and theories, by adopting some of their ideas; yet is inclined to the opinion that the atmospheric moisture in the vicinity of marshy low-lands, coming in contact with the investing membrane of the lungs in respiration, displacing a portion of the requisite amount of oxygen gas, thereby lessening the due supply of this ingredient for blood-making and the generation of caloric, is the predisposing cause of remittent fever (though it is confessed that the peculiarities of intermittent fever seem to depend on some infectious principle aside from this). The same dampness coming in contact with the skin, precluding the escape of carbon, nitrogen, and the other perspirable matters, as well as the imbibition of oxygen, conduces to the same end—the interruption of the process of healthy sanguification and the evolution of caloric. The fact that the erysipelatous fever of 1842 was more endemial and malignant in a continued moist atmosphere than in dry weather, serves to strengthen this position. The theory of Dr. Metcalfe "that the vital energy of animals and the development of their organization" depend on the amount of their respiration and the caloric resulting therefrom, makes it apparent that both are deficient in a humid atmosphere, and that this deficiency is the predisposing cause of congestive as well as remittent fever.

If, then, all the phenomena of physiological life are due to the completion of this pulmonary process, the caloric being conveyed by the arteries to the capillaries, for the purpose of uniting the proximate elements of nutrition to the solids; if composition and decomposition depend

on this primary function through the agency of caloric ; if, in short, the aëriation of the lungs be the primary function of sanguification, and caloric its immediate result, as maintained by Dr. Metcalfe, the higher temperature of arterial blood justifying this conclusion, it is obvious that the cause of derangement is primarily effective in the pulmonary organs, and that the recuperative powers of the system commence here. For, says our author, "the aggregate vitality of animals is directly in proportion to the quantity of their respiration, and the caloric that passes through their tissues ;" "the mean healthy temperature of all animals depends on the amount of their respiration ;" "caloric, air and food are the natural agents by which all the healthy operations of life are maintained ;" and caloric being the prime mover of the whole, the agent of derangement, we may infer, is of an opposite nature—lessening the oxygen of the air and food, thereby operating as an extinguisher of the caloric. And as the caloric, in the one case, is the connecting medium by which the nutrient particles of our food are united to the structures, so, in the opposite, it appears that the lack of it induces the pathological condition. "There never was a general fever," continues our author, "without a previous reduction of temperature—the first link in the chain of its morbid phenomena."

Now the question is asked, what is this counter agent or extinguisher of the animal heat in the commencement of fevers ? Whether this be humidity, malaria, sulphuretted hydrogen, or some other occult principle, not easy to define ; it is evident, from the effects, that there is a diminished quantity of oxygen gas inhaled, and a consequent deficiency of caloric imparted. And as, in its healthy supply, the caloric becomes refuse, like the elementary constituents of the blood, after being united to the organs, like them it necessarily passes out of the body as excrementitious. When, therefore, respiration fails to carry out its physiological results, it follows that the caloric, which should be its principal result, is inadequately supplied to the tissues, and consequently, falling short of its destined object, is unduly retained in the system—*becoming sensible heat* ; hence, the pathological condition. The agent that is productive of this failure is, thence, the extinguisher, in some degree, of that latent heat which sustains the phenomena of health. That a humid atmosphere is productive of this result (to say nothing of its malarious quality) is inferred from the fact of its lessening the due amount of oxygen gas in respiration, in proportion to the amount of humidity in the air, and lowering, in the same ratio, the temperature of the body.

If the predisposing cause of our fevers be according to the general hypothesis, malaria or some other impalpable poison—it is to be lamented that it cannot be indicated by analysis, or by a corresponding effect of something visible or tangible. Such not being the case, but the agent producing results corresponding with the effects of atmospheric moisture, and it being removed as the land becomes dry, a plausible pretext, to say the least, is afforded for fixing upon something tangible, in the investigation of morbid causes. The greater frequency of fevers among the first settlers of a new country, bordering lakes and marshy low-lands,

contrasted with the less frequent and mitigated form of subsequent fevers, after the forests have been removed and the lands cleared up, goes in proof that this change is the result of the miasmatic influence being swept away or dried up by the ingress and action of the winds. Such appears to have been the effect of like improvements on the borders of Lake Champlain.

In reference to the tissue on which the predisposing agency is supposed to act, in the development of fever, there are also different opinions. Some hold that nervous exhaustion is the primary effect, and that the suspension in the circulation and the various functional derangements are owing to this loss of nervous power. We are taught by Muller, Liebig and others, that the sanguineous fluid, the nervous force, and the elements of assimilation, reciprocally influence each other, without reference to priority of function. But there are certain nervous diseases which seem to sustain this theory—such as epilepsy, hemiplegia, chorea, &c. Yet whether, or not, these affections depend primarily on loss of nervous force, remains to be proved. If the axiom be sustained that “all organism depends on arterial blood,” and that “the duration of life in any part of the body, when deprived of arterial blood, is inversely as the quantity of blood required to maintain its activity,” we may safely conclude that nervous disorders, even, are the result of imperfect sanguification. Physiology teaches, moreover, “that division of the nerves going to the stomach, pancreas, kidneys, and other secretory surfaces, does not prevent them from secreting their respective fluids; but if cut off from the supply of living blood by tying their arteries, the powers of secretion, nutrition, sensation and motion are wholly suspended.” The nervous system, therefore, being dependent on arterial blood for the development of its force, its paralysis may with greater reason be attributed to failure in the arterialization of the blood. Mrs. H., a lady in affluent circumstances, full habit of body, though of the nervous temperament, aged 64 years, after a long season of care and anxiety, incident to the protracted and fatal illness of a daughter, was attacked, in the winter of 1846, with hæmoptysis and other indications of disordered lungs. Bloodletting was recommended, but nothing was administered professionally for several weeks, when hemiplegia set in, by the entire loss of sensation and motion of the right side of the body. Here it is evident that the lungs were primarily at fault, and that the subsequent paralysis was due to this imperfection of the lungs. Many such cases might be cited, did time and space permit.

“As in the ultimate changes through which organized particles have to pass, there exists an exact correspondence,” in a physiological sense, so pathologically there exists a corresponding derangement, including all the functions of the body. On the basis of this proposition, the writer of this paper will endeavor to illustrate the *rationale* of miasmatic causes in the phenomena of congestive remittent fever.

When the body has been exposed to the alleged cause of the fever—a humid atmosphere—and has perhaps suffered physical infringement, of some kind, such infringement, it may be imagined, gives impulse to the diseased

action which ensues. But if not excited by incidental causes, the system, no longer able to sustain its equilibrium by its inherent energies, at length succumbs to the predisposing agency alone. The blood being purified and renovated in the lungs by the process of respiration, any suspension in this process induces a corresponding suspension of capillary action everywhere—especially in a part injured by exciting causes. The capillaries, thus deprived of the requisite amount of caloric to combine the nutrient particles of the blood with the solids, cease, in a corresponding degree, to complete the ultimate changes that occur in a healthy state. Hence composition and decomposition are but partially performed—the particles being neither added to, nor separated from, the tissues. “That a process of this kind exists, is witnessed by examining, with the microscope, the capillaries, particles being seen constantly changing place—some adding to, other separating from, the mass of blood.” When, therefore, this function becomes suspended by reason of imperfect sanguification and the consequent want of animal heat, the capillary vessels become surcharged with blood and lymph. The heart, unable to supply the requisite force to overcome the engorgement, not being replenished with good arterial blood, or the requisite nervous influence, the kind and degree of action are not excited for this purpose. From this engorgement of the capillaries, “the vitality of the exterior surfaces,” says Dr. Wight, “is diverted to the central organs, by virtue of the tendency of electricity to pass from a positively to a negatively excited surface, and the cold stage of fever is revealed.” The capillaries of the skin being thus deserted by electricity and caloric, there being still a disposition to act without the power, the vessels become still more engorged with blood, and the next stage of fever is manifested in that of painful congestion. The blood sent to the head and nervous centres, under this hindrance, becoming more venous, congestion of these organs follows. And, “as respiration is partly a voluntary process,” it is rendered more powerless by the suspension of its tributary supply of voluntary power; consequently the “lungs become more paralyzed;” and the functions of the brain being oppressed, headache, coma and delirium ensue. The stomach, no longer supplied with pure arterial blood, fails to secrete the gastric fluid, and “nausea, vomiting or loss of appetite follow.” This primary function of digestion being arrested, the whole digestive apparatus is involved. “The liver, from its position” and office, being principally supplied “by the veins that bring back the blood from the stomach, spleen and intestinal canal,” first feels the effect of this want of harmony. The returning blood being unfitted for the secretion of healthy bile, “the bilious principle” is retarded in its separation from the blood; “hence the bilious tinge of the skin and eyes.” The lacteals, being endowed with a sort of elective sensibility, refuse to take up the impure chyle, or take it up in its impure state, and thus the elements for bloodmaking from this source are either withheld from the heart and lungs, or rendered unfit for healthy sanguification. These conjoined, with the moist and deficient atmosphere, and a want of cerebral influence, effectually suspend all healthy action throughout the system. Thus the mucous surfaces, mesenteric glands,

kidneys, and all the exterior surfaces, are brought into a state of painful excitation; and whenever these have suffered local infringement by cold or other exposure, to such parts "are the fluids more particularly directed." The capillaries being suspended in their action from engorgement, the respiration becomes hurried and frequent, to make up, it would seem, for the lack of oxygen gas received by the lungs, as well as oxygen from other sources. From this unnatural and augmented excitement of the respiratory function, the heart is enabled to exert sufficient force, perhaps, to overcome, in a measure, capillary congestion, and *re-action* is effected—ushering in the third stage of fever. "Re-action, then," says Dr. Wight, "may be considered as equivalent to a larger supply of oxygen in the lungs, the true *vis medicatrix nature*." In this general effort to balance the circulation, it is evident that the blood is not distributed to all parts alike, "some receiving more than their just proportion and some less. To the state of excess the term irritation applies," a state resulting in consecutive disorders, such as phlegmonous tumors, rheumatism, glandular enlargements and scirrhuses, scrofula, &c.

Thus adopting the foregoing predisposing cause of the fevers of the Champlain valley, and the *rationale* of its *modus operandi*, the third division of the subject is presented—that embracing prophylactic and remedial means.

From the learned and graphic essay of Dr. Wight, it is made apparent that the prophylactic means consist mainly in clearing and ditching our swamps and marshes, and converting their sickly beds into gardens of health by the simple process of agriculture. By thus removing the thick shrubbery and draining off the surplus waters, the deficiency of oxygen gas is obviated, not only by the action of the air in dissipating the atmospheric moisture, but by a greater supply of this vital principle being given off from the leaves of vegetables growing in a dry soil. And this is still more abundant from "plants vegetating in earth mixed with lime, with a due share of moisture, giving off three times as much," this difference being in the greater facility "in the decomposition of carbonic acid." It is proverbial that a limy soil is best adapted to fertility and vegetation; and with equal propriety it may be considered the greatest preventive of intermittent and remittent fevers. By its agency in absorbing the superfluous atmospheric moisture and drying up the undue wetness of the earth, an important hygienic object is attained in the business of agriculture, which, while it renders fertile our waste lands, removes their pestiferous influences.

If such results succeed the faithful cultivation of our low lands, a radical change is accomplished in removing the predisposing cause of congestive remittent fever. For we may combat morbid effects to no valid purpose, while the cause engendering the disorder remains.

[To be concluded next week.]

THE PAST AND THE PRESENT.

[Communicated for the Boston Medical and Surgical Journal.—Concluded from page 322.]

AFTER such a portraiture of the past, turn we now to the present, and let us together contemplate the contrast. And have the elevated character and dignified claims of the old school of physicians no succession now? Have that noble race of men left no representatives to perpetuate the aristocracy of professional learning, and to claim the respect due to medical scholarship? We may reverently exclaim, for the interest which humanity has in the issue, God forbid! Nay, verily, without implying any invidious discriminations among the worthy, or depreciating the claims of our fathers, it is still our glory that all over the land, and throughout the civilized world, "while we yield the palm of honor to the pulpit, and of money to the bar, we claim that of sound learning and scholarship for the physician." The nature of our profession, the profound and varied knowledge it demands, the ponderous tomes of antiquity whence its resources must be drawn; the multiplied and ever-accumulating results of experience and observation, recorded in the literature of ages, and the wondrous developments of modern science, all combine to invest our profession with paramount claims to an extent of sphere and scope for human genius absolutely illimitable. The field of research is so vast and complicated, so intricate, and yet so important, that to excel here requires physical endurance, mental cultivation, and moral power, with which few of our race are endowed, and which fewer still, in any age, have been found adequately gifted fully to explore. And yet there are men found, whose utilitarian creed has prompted them to dedicate their lives to the public service in this toilsome department of research, even without the ordinary incentives of genius, both subsistence and respect being often denied them in these degenerate days; when sound learning in every profession is so lightly esteemed in the popular creed and practice. Still, however, the old school physicians have very many worthy successors, whose scientific training has prepared them to understand and apply the resources of rational medicine, with a certainty and a success, which, while it exalts the claims of true science in their own estimation, constrains the homage of the intelligent and discerning to a profession, which ignorance and presumption have combined to assail and destroy. But the conspiracy has been vain, though collusion, fraud and imposture have entered the lists, and by their division of the spoils of quackery have gained over to the army of ignorance, deserters from our ranks, and apostates who have sold their birth-right for filthy lucre, less valuable than Esau's "mess of pottage," because won by the forfeiture of self-respect, and the sacrifice of principles sacred as honor, and valuable as truth.

Meanwhile, the traitors have been despised, though the treason has been rewarded by the *auri sacra fames*, the price of professional character, and the fellowship of the fraternity, both being sold like "meat in the shambles." The fate of such as have thus renounced their allegiance to rational medicine, and gone over to either of the medical here-

sies, whether foreign or domestic, which quackery has engendered, is at once the fruit and the proof of their own defective education in the principles of our noble science, and of their lack of capacity to estimate or apply its principles in the art of healing, their own want of success in gaining either fame or emolument furnishing the pretext which can alone account for their apostacy.

Nor can we exempt from these censures, the members of the fraternity, either at home or abroad, who have united with the defamers of our science, and combined to decry its principles as uncertain, and to depreciate its practice as ever of doubtful utility. For while we are ready to concede the imperfection of medical science inseparable from everything human, and admit that, as in other physical sciences, improvement is desirable and necessary in every department of rational medicine, yet we regard the efforts of physicians to disparage its character and claims in the style of Dr. Forbes, and Dr. Dixon of Great Britain, and their servile imitators here, to be not merely unbecoming and unworthy of them, but wholly unmerited and unjust. Indeed, their arrogance and presumption deserve rebuke, in view of the fact that while they aim a suicidal blow at the whole fabric which has been the work of centuries, and erected by men of giant intellects and stupendous acquirements; men of laborious observation and vast experience; yet the former is unable to project any substitute for the mighty building he would overthrow; and the other proposes, in lieu of rational medicine, a puerile hypothesis of universal periodicity, alike theoretically and practically absurd and imbecile. These are as unworthily employed as was Mesmer, in his silly conceit of *clairvoyance* and *medicin endormis*; or Hahnemann, with his *similia similibus*; or Thomson, with his *lobelia and cayenne*; or Priessnitz, with his *wet sheet and indiscriminate use of water*. These were all men of "one idea," and to name any or all of them in the same category with the founders or vindicators of rational medicine, as now taught and practised by so many of the mightiest minds of the age, would be profanity itself. Nor have they either separately or together been able to furnish even the projet of a new system of medicine, or even promulgate a single theory which will survive the century which gave them birth, save in the historic records which may be preserved of the sacrilegious assault upon the hoary and venerable principles of rational medicine, which are invulnerable to every attack, because immutable as truth.

But while the class of educated and scientific physicians are maintaining their integrity and perpetuating the succession of such by scholastic and clinical training, preserving the ancient dignity of the fraternity, and keeping at bay all the intruders into their temple, by withholding recognition and fellowship from every species of the genus quack; a change amounting to a revolution has been in progress among the masses of our population. The treasonable desertion, and the no less treasonable parleying with the enemy, by negotiating consultations and treaties with quackery on condition of participating in the spoils, have lost to the profession proper the vantage ground they once occupied. But still worse, the popular mind has become blinded to the true character and legitimate

claims of the aristocracy of learning, in all the liberal professions, so that ignorance in either is, to a frightful extent, no longer a disqualification either for the clergyman, the lawyer, or the physician; at least it is not now, as formerly, taken as *prima facie* evidence of such disqualification. The disastrous change in public sentiment here, finds a striking illustration in the startling fact that the progressive democracy of the times threatens to disfranchise from eligibility to the judicial seats of our highest courts the men whose legal lore should give them exclusive possession of the posts they only are qualified to fill, by rendering these high offices elective by the people in their primary assemblies. But even this, though it result in placing upon the bench personified ignorance, is scarcely parallel to the popular folly of deifying ignorance, by choosing as clerical teachers the apostle of Mormonism, or Father Miller, instead of those whom God and man unite to qualify as our religious guides. Nor is the vulgar adulation paid to quackery in many of the States, by legally abolishing all distinctions between physicians and quacks, less repugnant to reason or less mischievous. It is a humiliating sign of these degenerate times, when the masses of our people fail to discriminate the qualifications of the men to whom they commit their property, their health and lives, or even their souls. Learning has come to be undervalued if not contemned in every department; to attain excellence or even superiority in the professions is no longer the passport to the rewards of patronage, except by the discriminating few; while pretension, impudence and ignorance seduce the multitude under their triple banner, and carry off the prizes of both fame and emolument.

Honor to the men who in our profession give evidence that in their estimate, money is not "the chief end of man," and therefore resist the temptations which the defection of the multitude from reason, and their devotion to ignorant pretension, are ever presenting, to turn them aside from their unrequited toil for the public good. Their learning may fail of its appropriate and adequate recompense, by reason of popular delusion, but, strong in their conscious superiority, and secure in the regards of the judicious and discerning few among the profession and the public, they will still find an ample reward in the favor of the wise and the good. And though popular ignorance may still prove for a time the *pabulum vite* of the hydra-headed monster of quackery, yet it will presently be dissipated by that universal education which is the early destiny of our young republic; if it does not sooner become self-annihilated by the discovery of its results upon its hecatomb of human victims. Let us not, then, despair of the future, by the glaring contrast between the present and the past, for *magna est veritas et prevalebit*. R.

CASE OF WOUND OF THE HEART.

[Communicated for the Boston Medical and Surgical Journal.]

S. S., of Camillus, N. Y., aged 7 years, received a wound between the 7th and 8th ribs, at or near the sternal extremities, by a thrust from a nar-

row but long-bladed penknife. A jet of blood followed the withdrawal of the knife, which was instantly stopped by the finger of the mother. Syncope instantly followed, but he soon rallied. I saw him ten minutes after the accident. His pulse was feeble; he was pale, and bathed in a cold sweat. He was rational; his breathing free, without any irregularity of pulse. The syncope was repeated on the same day, and the day following, without any aggravation of the symptoms. From this time he became better, and resumed his school, was playful, and finally manifested his usual state of health. Three weeks and four days from the accident, he was taken with a sudden and fatal syncope.

Autopsy, twenty-four hours after Death.—Wound through the integuments healed. Some extravasation through the superficial fascia. A cicatrix of the size and form of the knife-blade was found on the pericardium, which contained eleven ounces of blood, the serum of which was separated from the fibrin and coloring matter as perfectly as could have taken place in a bowl. There was an opening in the anterior coronary artery. When was this blood discharged? Was it gradual, or was it sudden? Was it all discharged at the period of the first syncope, or was the shock from the wound upon the system sufficient to produce such syncope? Or was the fatal syncope from hemorrhage produced from sloughing of the artery, at the moment of death? Or was the hemorrhage gradual?

My own opinion is, that the wound produced syncope independent of hemorrhage; that this was trifling, if any, at first. The subsequent fits of syncope were the result of the wound on the nerves of the heart. And finally, that the fatal hemorrhage was sudden and instantaneous. The patient would have recovered perfectly if sloughing of the coronary artery had not taken place. Such cases do recover, in all probability. We hear of cases where buffaloes have been killed, and rifle or musket balls found lodged in the substance of the heart; having entered a long time previous to death.

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CONTINUATION OF THE REPORT OF M. VELPEAU, SURGEON TO THE HOSPITAL LA CHARITE, PARIS.

By F. Willis Fisher, M.D.

[Communicated for the Boston Med. and Surg. Journal.—See pp. 269 and 269.]

BURNS. CONTUSIONS. WOUNDS. DISEASES OF THE LYMPHATIC SYSTEM.

In a certain point of view, it seems advantageous to consider burns with contusions, for these two lesions have really great analogies. They both occur in every region of the body; they may be either light or grave; both admit of division into degrees, a division become classical, and which we shall not trace back for burns. If one studies contusions, he sees that each of those degrees admitted for burns is found exactly. In the first degree, the contusion is limited to a simple erosion of the tissues;

in the second, there is a raising of the epidermis ; the third is characterized by the formation of an eschar, which comprises a portion of the thickness of the skin ; in the fourth, the skin is modified in all its thickness ; in the fifth, the aponeuroses are attacked ; in the sixth, the whole limb is struck with death. This is not, as one may be disposed to think, a simple speculation of the mind, or an affair of curiosity ; there is in this comparison useful instruction, which bears on the prognosis and treatment of these lesions. The first degree yields quickly, with any kind of treatment. The burn of the second degree heals in some days, whatever be its extent of surface ; this is one of the questions most important to know. On the contrary, burns of the third and fourth degrees never heal quickly, whatever means be employed, and individuals who propose remedies against burns and contusions of these degrees, propose only an absurdity. In fact, when a portion of the skin, or the entire skin, is modified, it follows that the slough, which becomes a foreign body, must be cast off or eliminated, and that reparatory labor must take place to compensate for the loss of substance ; and what effect can the pretended remedies have upon this ? In the fourth degree of burns, the healing is still more difficult, and the lesion is susceptible of being accompanied by graver accidents. Arrived at this point, the subcutaneous layer is left exposed when the eschar falls ; this layer may inflame and become the source of diffuse suppuration, the prognosis of which is very serious. There follows, from what we have said, this result, more important than a title between two burns, of which one extends in surface including only a portion of the skin, and of which the other may be very limited but including the whole thickness of the integuments ; the second has more difficulties, and requires more time for cure. With equal extent, and even with much greater extent, the first would be much less dangerous than the second. One also observes that always when the skin is completely pierced, the cicatrix, having no point of support, forms itself with more difficulty. When a certain thickness of the dermis still remains, on the contrary, the cicatrix is formed much more rapidly ; this explains why the time necessary for the cure is far from being the same in these two degrees of burns. Burns of the fifth and sixth degrees, require amputations ; in this respect they are similar to contusions, which require the same treatment. The treatment of the first and second degrees consists in the application of oily liniments, oil and lime water for the face and trunk, and the application of bandages for the limbs ; the third and fourth degrees require emollients at first, and detersives after the fall of the eschars.

Fifty-two cases of contusions have been received, some trifling, others grave, and others intermediate. It is principally on account of the infiltration and effusion of blood which accompanies them, that we shall examine contusions. When in consequence of violence blood is found effused in the tissues, it is found there in two distinct forms : either in a state of infiltration or collection. The blood infiltrated after contusions, unless it proceeds from the rupture of some large artery, is never a very grave accident. It is soon absorbed. This infiltration of blood takes place

according to certain laws very interesting to study; the blood does not follow, as one would suppose, a descending course; its progress is modified by the different organic layers which it meets, so that the fluid seems to resist the laws of gravity to which it is subjected, and the irregular disposition of the different aponeuroses causes it to appear to ascend against its own weight, when in reality it only obeys the directions that the resistance imposes upon it. Thus, for example, one will be deceived, if, beforehand, he thinks that blood effused in the superior portion of the thigh must necessarily descend and be infiltrated in the limb; one will be deceived if he supposes that infiltration in the perineum ought to invade the internal portion of the thigh and continue its route in that direction. Velpeau has seen effusions of blood in the perineum ascend towards the chest; others, commencing at the lower part of the thigh, mount towards the root of the limb. This singular phenomenon follows from the anatomical disposition of the parts; thus, in the groin, the subcutaneous fascia contracts adherences in such a manner as to form a kind of *felting*, which opposes the progress of the liquid downwards and forces it to rise; analogous dispositions in other parts allow us to foresee the course which these infiltrations will take, with the greatest facility. When the blood, instead of being infiltrated, is found collected, resorption sometimes takes place, but more frequently the collection remains. It is necessary, then, to bear in mind, in order to foresee what may take place, all the transformations that blood thus shut up may undergo, either in the tissues or in any close cavity. First, it possibly may cause an inflammation and form a sanguineous abscess. At other times, it happens that the fibrinous portion is left alone by the absorption of the serous portion of the blood, and there results a solid tumor of the fibrinous kind; or, on the contrary, the coagulable portion may be absorbed and a reddish serum remain. One also sees sometimes both the fibrinous portion and the coloring matter absorbed, and a liquid completely serous remaining. Finally, in some cases, at the end of a certain time one finds, instead of a sanguineous effusion, lumps similar to grains of cracked rice floating in a reddish fluid. According to Velpeau, these are not hydatids as some believe, but simply the result of an effusion of blood, the coloring portion of which has disappeared, and the solid portion of which has been separated, in consequence of the motion of the parts in which it is found. These productions are always observed in the neighborhood of very moveable articulations (elbow, wrist, &c.), which confirms Velpeau's theory of their formation. Finally, it is probably necessary to class among the possible transformations of the blood shut up in cavities, the origin of those foreign bodies which we meet with free in the articulations. One sees, then, that the consequences occasioned by contusions, carried to a certain degree, are as numerous as varied. Contusion being a very frequent lesion, it is not surprising that one observes so often the number of productions that it may engender. We will add, also, that it is possible that effused blood gives rise to tumors of different kinds, and, perhaps, though Velpeau advances the opinion only with reserve, sometimes to tumors of a bad character. The treatment of con-

tusions, when the sanguineous effusion is only infiltrated, is very simple; it consists in the employment of resolatives, sometimes leeches, and time; in general, the affection presents nothing dangerous. Velpeau has made an observation which he thinks new; it is, that those individuals who have received some extensive contusion, frequently present one uniform yellow discoloration of the whole body. It is a phenomenon not easily explained, but one which he has observed in many patients. As to the sanguineous collections, as Velpeau has previously demonstrated, they are best cured by crushing the tumor when it is possible; that is, when the tumor is situated upon a solid point. By this means the collection is transformed into an infiltration, and we not only cure the patient more quickly, but we place him out of the reach of those various and serious consequences which arise from sanguineous collections remaining either in the tissues or the cavities.

Wounds, very common lesions, presented nothing of importance. There have been a great number of cases; four only were complicated with arterial lesions; one of the patients had repeated hemorrhage; the ligature was applied in two cases. With one exception, all recovered.

The diseases of the lymphatic system have amounted to forty. The inflammation of the lymphatic vessels is in every respect similar to an erysipelas. There are two species: the primitive, for which the patients enter the hospital; that is to say, when the angioleucitis is their sole disease; the secondary, when it happens as a complication. When the etiology of angioleucitis is properly understood, one will not be surprised to see this affection arise in the surgical wards. When we know that it is not necessary for the patient to have a large wound in order to develop this disease, and that it may arise from the smallest wounds, a slight excoriation, a hang-nail even, we are surprised that we do not meet with it more frequently. The prognosis which we have given for erysipelas, applies, in all points, with the same modifications and restrictions, to angioleucitis. When the disease is primitive, and constitutes the sole affection, it is not grave. We have not lost a single case of seven which were found in these conditions. On the contrary, when angioleucitis occurs as a complication, it is formidable; there have been four cases and two deaths. Like erysipelas, also, angioleucitis is announced by precursory symptoms, such as chill, thirst, loss of appetite, &c.; but in erysipelas, these precursory symptoms are more plain; the tongue remains moist, though slimy. The pulse is small, unequal, tongue dry and crusty, sometimes reddish, in angioleucitis. The precursory symptoms of these diseases resemble, and are sometimes mistaken for, variola, measles, or some other eruptive disease. Erysipelas and angioleucitis are sometimes blended, but the pathognomonic character of erysipelas will always be found. It consists in that particular kind of redness, which causes the patch which terminates bluntly, with an elevated border, to appear redder and more inflamed on the edges than in the centre. In angioleucitis, it is the contrary. In erysipelas the inflammation is eccentric. In angioleucitis, it is concentric, a distinction not to be forgotten.

Inflammations of the lymphatic ganglions have been received to the

number of eighteen, and in seventeen the adenitis terminated by supuration. This result does not conform to general observation, for reasons easily explained. Patients do not enter the hospital with adenitis until the disease is so far advanced that all hope of producing resolution is lost. In private practice, on the contrary, resolution is accomplished by the employment of the proper remedies at the commencement of the inflammation. Besides, patients do not wish to enter the hospital unless there is much inflammation and pain, and when the adjacent cellular tissue is also attacked; but in such cases suppuration is inevitable. These inflammations in practice may be advantageously compared to those of the mamma, and their prognosis depends upon three categories—whether the inflammation is in the ganglion itself, in the cellular tissue above it, or the cellular tissue below it. The gravity of the prognosis is according to the depth of the disease. The etiology of the ganglionic engorgements is the same as that of angioleucitis. Five patients were operated upon, one died, the others recovered. The ganglionic engorgements, the acute adenitis, and the angioleucitis, recognize the same etiology. This includes the whole class of lymphatic diseases, a numerous class, embracing that multitude of affections known as scrofulas and engorgements. It should be remembered that both the acute and chronic inflammations of this system originate in those thousand trifling irritations, some of which frequently pass unnoticed, such as pricks, excoriations, blisters, burns, &c. This origin is the same and equally as easy to be understood in diseases wholly medical, since there are lymphatic vessels everywhere, both on the exterior and in the deep parts; these suffer irritations, the products of which are exhibited in the ganglions. This simple explanation is generalized daily, and we no longer need to have recourse to the idea of an imaginary virus to explain the nature of these diseases; it renders their therapeutics clear, and is advantageous in every respect.

THE DISEASE KNOWN AS MORBID SENSIBILITY OF THE RETINA,
ILLUSTRATED BY CASES.

By George A. Bethune, M.D., one of the Surgeons of the Massachusetts Eye and Ear Infirmary.

[Communicated for the Boston Medical and Surgical Journal.]

THE following remarks formed part of a late lecture on amaurosis, to the students of the Tremont St. Medical School. It has been suggested to me, that they should be published. A reason for this may, perhaps, be found in the fact that a great deal has lately been said on the subject in this place, and that but very little has ever been written. The cases I have added, though of necessity very imperfect, cannot be without interest for those who may be called on to meet such in their practice.

Amblyopia, Weak Sight.

This is an amaurotic affection which is barely alluded to in the English books, but which, from its frequency, in this country at least, de-

mands a more lengthened consideration. Lawrence speaks of it as an incipient stage of amaurosis, which occasionally becomes permanent. McKenzie almost apologizes for alluding to it at all as a separate disease, and after enumerating a large portion of the affections to which the eye is subject, says that any of these, and many others, by ignorance or carelessness, may be set down as weakness of sight.

It is certainly not a little curious that a disease of which we see so many, and often so embarrassing cases, some of which refuse to yield to any course of remedies, should be so lightly spoken of by writers of the accuracy and copiousness of those I have just quoted. It leads to the suspicion that there are causes at work among ourselves which cannot exist to the same extent in Great Britain. I think I may say, without exaggeration, that I have known, among my own personal acquaintance, several hundreds more or less affected with this disease, which with us passes under the name of morbid sensibility of the retina.

Subjects.—The more common subjects for this affection are persons engaged in sedentary occupations which require the use of their eyes on small objects. Another large class are persons in easy circumstances, of nervous and susceptible temperament, and who pass a large part of their time by day and night in reading or study.

Causes.—Besides those which everywhere exist, I think there are several circumstances, which, taken together, may account for the peculiar frequency of this affection in this region. The first of these is the climate. Compared with England, we have probably two or three of what are called pleasant days to their one, and even in their clearest weather it is rare to find that very clear and dry atmosphere of which we have so many days, especially in the winter, when the glare of the snow adds so much to the dazzling effect of the sun's rays. Secondly, we are the most reading people in the world. Thirdly, as a natural consequence of this, to meet the universal demand, from people with small means as well as with large, we read the cheapest and the worst books (I mean the worst-printed books) of any people on earth. If we add to this the bad influences of the modern furnaces and cooking stoves in crowding the head and eyes with blood for many hours at a time, unrelieved, as formerly, at least in many houses, by the cooler entry or bed-room, I think we go far towards accounting for the great prevalence of this disease among ourselves, especially if we consider that probably in no other part of the world are there so many under the constant influence of causes affecting the nervous system in general.

Any cause which deranges the health may undoubtedly predispose to its attack. Among females the most common I have found to be irregular menstruation and leucorrhœa. In some women so affected, the symptoms are aggravated at the menstrual period.

CASE I.—Morbid Sensibility of Retina.—Jane C., 26. Oct. 9th, 1845. Health not good. *Menstruation irregular.* Leucorrhœa.

First troubled by eyes 6 years ago. Present symptoms are, *muscæ volitantes*, feeling of weight in lids with an inability to raise them, and dimness of vision on looking at objects. Ordered an injection of acet. of

lead, per vaginam, 3 ss. to a pint of water. Cathartic of calomel and rhubarb, pediluvium quaque nocte.

14th. Leucorrhœa less. Eyes somewhat better. Continue injection per vaginam, and to take, for costiveness, tr. colchici (of the root) ten drops three times a day.

CASE II.—*Morbid Sensibility of Retina.*—Mary A. T., 32. May 26, 1846. Her health is not very good. Costive. Appetite indifferent. Leucorrhœa. *Eyes are worse at menstrual periods.* Is somewhat dyspeptic. Has been married 8 years. Never pregnant.

She says that the first trouble in her eyes commenced when she was 17, by indistinct vision on looking at objects. For two years and a half past she has had pain in the eyes, and through the temples, for some time past nearly constantly. Is apt to have cold feet. She has had leeches, blisters, setons, &c., without relief. She was directed a liniment of ammonia and croton oil to spine. To take a solution of citrate of iron, c. syr. rhei, 3 in die, 3 j. each dose containing 2 grs. of iron, to exercise freely in the air, and to apply to the eyes warm or cold water as either should prove more agreeable. 30th. Much the same. Cold applications, proving more grateful, were ordered, and she was to inject, per vaginam, a sol. zinci sulph. gr. j. 3 in die, for the leucorrhœa. June 4th. Four days ago omitted medicine on account of diarrhœa, oppression and faintness. But she says that *while sickness continued the eyes felt well.* Apply emplas. ferri to stomach. R. Infus. quassæ cascarilla and aurantii 3 ij., increased gradually to 3 i. 3 in die. To apply above brows the strong tr. aconiti once a day. 8th. Instead of once, she has applied the tr. *twice a day*, followed by dizziness, confusion, and difficulty of walking. Now *has no pain in eyes.* Directed to continue barks, and to use the aconite if pain return.

[To be continued.]

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON. NOVEMBER 25, 1846.

New York Correspondence.—In addition to the extensive occasional and miscellaneous correspondence which this Journal already enjoys, we have secured to it the additional advantage of having a regular correspondent and contributor in the city of New York, who will furnish such local medical intelligence as may come to his knowledge in that city; and also communicate whatever his opportunities, taste, or individual views on subjects of general professional interest, may suggest. He is one on whose ability and discretion we may rely with much confidence. His opportunities for study and clinical experience have been ample, and his acknowledged acquaintance with medical literature, both foreign and domestic, will enhance the value of his contributions. The gentleman to whom we allude is David M. Reese, M.D., formerly professor in the medical department of Washington University, Maryland, but perhaps

more extensively known as the author of the American edition of Cooper's great Dictionary of Surgery, in which the discoveries, improvements and claims of American surgeons were for the first time advantageously arranged for publication. As already intimated, the opinions expressed in his correspondence may be considered as his own, although we do not anticipate anything from his pen from which we should wish to dissent.

We take this opportunity to repeat, what has before been stated to the readers of the Journal, that we do not hold ourselves responsible for the opinions of any one who may contribute to our pages. The Journal is open to the profession, and intended for the profession, and not in the interest of any school, association or clique—and, therefore, each reputable physician, in his turn, has a fair opportunity, within the limits which we must prescribe, of expressing himself upon all subjects appertaining to medicine, surgery, or humanity in general. Under the influence of a strong desire to promote the extension, among the profession, of useful knowledge, and to increase the sum of human health and happiness, the editor feels that the course he is thus pursuing is right and proper, while it is liberal towards all who have the same principles at heart which govern himself.

Improvements in Filling Teeth.—Another discovery has been made in the manner of preparing gold for dental purposes, which is thought, by those who are conversant with the subject, to be superior to Dr. Smilie's plan, referred to last week, of fusing the gold at a remarkably low temperature. The latest, and, as several competent judges aver, the very best method of filling with the pure, precious metal, originated with our ingenious neighbor, Dr. Charles T. Jackson, a gentleman who takes the first rank in chemistry. Dr. Smilie acknowledged, without hesitation, that his filling was only sixteen carats fine. Dr. Jackson, on the other hand, admits nothing short of the utmost degree of purity. On this depends the superiority of his material over that of the other. Without uniting the gold with any base metal, we are assured that he actually prepares pellets, almost as flocculent as wool, which only require a slight degree of manipulation, to fit them to the ragged interior of the tooth, without pain, and with so slight a pressure as to make no disturbance in the region. Finally, when the patient leaves the operator, he is happy in the reflection that the defective organ has been secured without suffering, and that the filling is unmixed, and really what it is represented to be—virgin gold. Trifling as this might at first appear to a person who has no personal experience in being under the heavy pressure of the dental operator's punches, those who have borne the fatigue of being belabored scientifically, to save a few diseased teeth, sound, will hail this or any other process which promises amelioration from torture, with marked pleasure and interest. We sincerely wish the excellent and industrious discoverer of the secret of preparing gold in this novel manner, may derive a pecuniary advantage from it, commensurate with his just deserts.

Placenta Forceps.—In the mass of new surgical apparatus which Mr. Burnett has lately procured, are several novel midwifery instruments—among which, the placental forceps are prominent. They are solely in-

tended for seizing the placenta under circumstances which sometimes, though rarely, occur. They are truly beautiful in workmanship, and ingeniously contrived. Belonging to the same group of newly manufactured and improved instruments, are Dr. Bedford's guard forceps, and Dr. Channing's improved midwifery forceps, which combine the mechanical advantages of several familiar kinds. Both these gentlemen are professors of the obstetric art—the first being in the University School, New York, and the latter in the Medical School of Harvard University. Whatever they sanction, ought to command the confidence of less experienced practitioners.

Rectum bougies, very admirably constructed of elastic gum, struck us as being very valuable in practice. A preference is given by some gentlemen here, to heavy metallic bars, bougie shape, of considerable size. Dr. Henry G. Clark, we understand, who is eminently successful at the north part of the city, in the treatment of piles, orders these in preference to any kind recognized as being useful. We apprehend that rectum bougies are not resorted to as frequently as they might be with striking manifestations of advantage to the patient. There is a fashion to be followed in the treatment of chronic diseases, as well as in the cut of a coat. The surgeons of thirty years ago, derived much more assistance from these very instruments, though of inferior manufacture, than their successors of the present day.

Medical Eclecticism.—A little sheet, called the *Eastern Medical Reformer and Monthly Journal of Medical and Surgical Science*, published at Rutland, Vt., calls out most lustily upon all the odds and ends of society, who are favorable to a "consistent reformation in the application of remedial agents," to meet at that place on the 8th of December next. "They are cordially solicited to attend a mass convention"—on which occasion an eclectic medical institute will be formed. And that is not all; great doings are contemplated—for a lecture will be given, we are told, on the principles of eclecticism. From a critical examination of the programme, it is evident that a blow is intended, of no ordinary force, the effects of which on the present condition of the medical world, no human foresight can determine. That it will be dreadful, is readily admitted. If all the people who are dissatisfied with physic as it is, should assemble at the top of the Green Mountains, on the day appointed, and each one should succeed in having his own peculiar views of what is what, adopted by the mighty assembly of "eclectic" beings on that occasion, what might not be expected from the combined power of so many "reformers," all in action at once, on the future destiny of that imaginary phantom, heretofore called medical science! As mercy is an attribute of the gods, may the mass meeting of "eclectic reformers" manifest its existence in their deliberations, and not, in their haste to establish a new system, founded on laws which they recognize in nature, shock the inhabitants of christendom by suddenly overthrowing, by a single vote, all the old and revered institutions of medicine and surgery in this and other countries.

Dental Mirror.—A practical dentist, Mr. H. G. Luther, of this city, has issued the first number of a quarto monthly sheet, with the above name,

which is sold at one cent a copy. The selections are appropriate, and intelligence is circulated in it that will be read with satisfaction by all persons. We are advocates for the diffusion of useful knowledge, under whatever name it assumes, and the proprietor, therefore, has our cordial wishes for the success of his enterprise.

Corpus Luteum.—Dr. Purple's curious and thorough investigation, entitled "*Corpus Luteum: its value as evidence of conception, and its relation to legal medicine,*" &c., which first appeared in the *New York Journal of Medicine*, has been published in a pamphlet, by Messrs. J. & H. G. Langley. Dr. Purple has been critically exact in all his anatomical examinations, and we cannot withhold from him the expression of our entire confidence. There are certain yellow bodies found in the ovaries of females, called, technically, *corpora lutea*, which he divides into true and false. Some very marked cases are introduced, corroborative of the author's theory, or facts, which must continue in all future times to be of importance in legal medicine. A synopsis of the trial of Mr. Angus, of Liverpool, for the murder of Miss Burns, adds very much to the general interest of the article. Had Dr. Purple's views been proved correct at that period, and known to the law officers of the crown, the accused would not have been acquitted.

Medical Department of the Army.—The Army Medical Board, lately in session in the city of New York, has recommended the following persons for appointment to the Medical Staff of the Army:—Robert Newton, Pennsylvania; Horace R. Wirtz, do.; Israel Moses, New York; John F. Hammond, South Carolina; Josephus M. Steiner, Ohio; Robert C. Wickam, Virginia; Charles P. Dyerle, do.; Elisha J. Bailey, Penn.

National Medical Convention.—At the meeting of the Ohio Medical Convention, held at Columbus, May 12th, 1846, Prof. M. B. Wright, of the Medical College of Ohio, Prof. Samuel St. John, of the Medical College at Cleveland, and Prof. John Butterfield, of the Medical College at Willoughby, were appointed delegates to represent that Convention in the National Convention to assemble in Philadelphia in May, 1847.

New York Correspondence.

Re-publication of Spurzheim's Works.—Harper & Brothers, of New York, have just published the fifth American edition of Dr. Spurzheim's latest work on Phrenology, or the doctrine of the mental phenomena. The two volumes are bound in one, comprising both the physiological and the philosophical parts, as the author was wont to call them. The admirers of the new science, not only, but even those who withhold their assent from its teachings, will find in this volume the fullest exhibitions of its doctrines by the great master, who, although second to his predecessor, Dr. Gall, yet far surpassed him in genius, learning, industry and zeal. The work is brought out in the publishers' best style, and the numerous

plates are well executed; while for reading or reference, its condensation in a single volume is a decided advantage, especially as the type is large enough, and the volume of very convenient size.

American Journal of Homœopathy. Drs. Kirby and Snow, Editors.—The 14th No. of Vol. I., bearing the foregoing title, is a real curiosity in its way. It bears the transcendental motto, "The agitation of thought is the beginning of truth;" which, if it mean anything, seems to imply that truth has not yet had a beginning, and hence Drs. Kirby and Snow have undertaken to "agitate thought" by their Journal, in the hope of giving truth a beginning. Not having had the pleasure of hearing of either of the *duo* editors before, who modestly style themselves "Doctors," prefixing this title to their names, we are led to doubt whether they have the right to affix any professional title, and presume they are only self-styled homœopathic physicians, in which capacity the less of knowledge they have the better, in "the learned lumber of the schools," as Hahnemann calls the scientific and scholastic stores of medical literature. But Hahnemann was mistaken when he said "the true art of healing begins with me," for truth has had no beginning yet, nor can have until Drs. Kirby and Snow succeed in "agitating thought."

We have looked through this No. in vain for any evidences of "agitation" or even of "thought" itself; nor have we found any semblance of truth which we can admit to be such, unless the following specimens can find credence.

The creed of American physicians is represented to be that "if we only know a disease, the cure is easy enough—it will come of itself!"

Again, "The old school is destitute of a *materia medica*, and as a consequence it has no *therapeutics*; that is, not knowing the remedial agents, it can have no rules for their application in diseases!"

Surely, assurance can no farther go; and such "agitation of thought is the beginning of truth!" *Vive la Bagatelle!*

TO CORRESPONDENTS.—We must again claim the indulgence of numerous friendly correspondents. Besides the favors already acknowledged, and which have not yet been inserted or commenced, are—A paper on the Use of the Etheral Vapor, Phocion's "Sermon to Physicians and others," A new plan of Medical Reform, by "Old Physic," Dr. North's Dissertation read before the Vermont Medical Society, and Dr. Hubbard's notice of a Mesmeric Prescription.

MARRIED.—W. W. Hall, M.D., of New Orleans, to Miss H. W. Matlock.—Wm. H. Miller, M.D., of West Poughkeepsie, N. Y., to Miss F. M. Wentworth.—At Canaan, N. H., Dr. Arad Wheat, to Miss J. M. Gage.

DIED.—At Concord, Mass., Dr. Prentice Bogue, of Barnegat N. J. 65.—At Louisville, Ky., Dr. James Moore, late of Waterford, Conn.—In Sheffield, England, Dr. Flavell, President of the Provincial Medical Society.—In Effingham, N. H., Dr. David W. Clark, formerly of Sturbridge, Mass., 68.—At Leicester, Dr. Joseph Flint, of Springfield, Mass., 68. Dr. F. was an eminent practitioner of Medicine and Surgery. It is hoped some gentleman will favor us with a memoir of his life.

Report of Deaths in Boston—for the week ending Nov. 21, 44.—Males, 23—females, 21—Stillborn, 3. Of consumption, 12—infantile, 5—hemorrhage, 1—disease of the lungs, 1—marasmus, 3—drowned, 1—croup, 4—jaundice, 1—disease of the bowels, 1—diarrhoea, 1—throat distemper, 1—accidental, 1—dropsy on the brain, 1—debility, 1—hooping cough, 2—lung fever, 2—intemperance, 1—dysentery, 1—scrofula, 1—br. nchitis, 1—disease of the heart, 1—unknown, 1.

Under 5 years, 13—between 5 and 20 years, 4—between 20 and 40 years, 12—between 40 and 60 years, 5—over 60 years, 5.

Dental Literature.—"A Popular Treatise on the Teeth, &c. &c., by E. G. Kelley, M.D., Member of the American Society of Dental Surgeons, and of the Massachusetts and Boston Medical Societies." A second edition of this Treatise has just been published by J. Munroe & Co., 134 Washington st., Boston. A while since we noticed that dentists were considered conservators of the public health. If such is the case, this author is eminently so. He not only shows how directly ill health and imperfect physical training in childhood, operate in the production of subsequent bad teeth, but traces the connection of the latter as the chief cause of much disease and suffering, which none but physicians, and only a few of them, fully realize. It is his opinion that the great mass of dental disease may be prevented by early and proper care; that in general the teeth, if filled when decayed, as they should be, may be preserved during life. In this operation Dr. Kelley takes special pains. Many, also, who suffer from imperfect mastication without teeth, are not aware how much their health and comfort might be improved by restoring the natural complement. Dr. K. has lately established himself in Boston, in an eligible location, in Tremont Place.

Hospital for Children.—It is spoken of as a matter already settled, that Dr. Wm. Lawrence, of this city, who has lately returned from Europe, has purchased the old Medical College in Mason Street, which is to be fitted up for an Infirmary for children and infants.

Medical Miscellany.—The first lecture on Anatomy, in the New Medical College, in this city, was given on Wednesday, November 11th, by Dr. Warren.—The contemplated hospital at Brooklyn, N. Y., is likely to go into operation—the trustees having been chosen.—Messrs. S. & W. Wood, No. 261 Pearl Street, New York, have an admirably well selected stock of medical works, embracing the richest and rarest—which physicians should recollect, when visiting that city. Their new catalogue is now ready.—A slave recently died at Frankfort, Ky., at the age of 112 years. When 84 years of age, he married his fourth wife, and raised a family of 7 children.—A girl, 15 years of age, living at Georgetown, Ky., actually committed to memory the whole of the New Testament, in six weeks, besides attending, in the mean while, to her ordinary domestic duties.—A treatise on Neuropathy, by Frederick Hollick, M.D., is announced at Philadelphia.—Capt. Thistle, late of Florida, has invented an ambulant—a kind of bed-on-wheels, for conveying sick and wounded soldiers from the field of battle. Is it any better than Baron Larrey's?—Under date of Sept. 26th, 20,000 had died of the cholera in Persia. It had passed the Russian quarantine on the borders of the Caspian Sea, and is now raging in the Tartar villages.—Dr. James G. Russell, of Pontiac, Michigan, has been acquitted of the crime of poisoning his wife with arsenic.—More than 1000 soldiers have died on the banks of the Rio Grande. A regiment from Alabama lost 100.—New York is reported to have had 4,526 drunkards before the police in the last six months.—A correspondent at Madison, Wisconsin, writes that the past season was the most sickly which has been known in that region—most of the cases intermittents and remittents.